

Application Data Sheet

Application Information

Application number:: 10/578,864

Filing Date:: June 22, 2006

Application Type:: Regular

CD-ROM or CD-R?::

Number of CD Disks:: None

Number of copies of CDs:: None

Sequence submission?:: No

Computer Readable Form No

(CRF)?::

Number of copies of CRF:: None

Title:: HEADBAND DEVICE FOR AN

OXYGEN MASK, AND

METHOD FOR THE

PRODUCTION THEREOF

Attorney Docket Number:: PTB-4750-46

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure:: 1a

Total Drawing Sheets:: 5

Small Entity?:: No

Petition included?:: No

Petition Type:: None

Licensed US Govt. Agency:: No

Contract or Grant Numbers:: None

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Germany

Status:: Full Capacity

Given Name:: Bernd

Middle Name::

Family Name:: LANG

Name Suffix::

City of Residence:: Gräfelfing

State or Province of Residence::

Country of Residence:: Germany

Street of mailing address:: Jahnstrasse 49

City of mailing address:: Gräfelfing

State or Province of mailing address::

Country of mailing address:: Germany

Postal or Zip Code of mailing address:: 82166

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Germany

Status:: Full Capacity

Given Name:: Achim

Middle Name::

Family Name:: BIENER

Name Suffix::

City of Residence:: Aufkirchen

State or Province of Residence::

Country of Residence:: Germany

Street of mailing address:: Am Herderfeld 5

City of mailing address:: Aufkirchen

State or Province of mailing address::

Country of mailing address:: Germany

Postal or Zip Code of mailing address:: 85445

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Germany

Status:: Full Capacity

Given Name:: Martin

Middle Name::

Family Name:: BECHTEL

Name Suffix::

City of Residence:: Winsen/Luhe

State or Province of Residence::

Country of Residence:: Germany

Street of mailing address:: Brahmsallee 24

City of mailing address:: Winsen/Luhe

State or Province of mailing address::

Country of mailing address:: Germany

Postal or Zip Code of mailing address:: 21423

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Germany

Status:: Full Capacity

Given Name:: Harald

Middle Name::

Family Name:: VÖGELE

Name Suffix::

City of Residence:: Gauting

State or Province of Residence::

Country of Residence:: Germany

Street of mailing address:: Waldpromenade 45b

City of mailing address:: Gauting

State or Province of mailing address::

Country of mailing address:: Germany

Postal or Zip Code of mailing address:: 82131

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Germany

Status:: Full Capacity

Given Name:: Caspar

Middle Name:: Graf

Family Name::

STAUFFENBERG

Name Suffix::

City of Residence::

Gauting

State or Province of Residence::

Country of Residence::

Germany

Street of mailing address::

Römer-strasse 17 ½

City of mailing address::

Gauting

State or Province of mailing address::

Country of mailing address::

Germany

Postal or Zip Code of mailing address::

82131

Correspondence Information

Correspondence Customer Number::

23117

Representative Information

Representative Customer Number::

23117

Domestic Priority Information

Application::

Continuity Type::

Parent Application::

Parent Filing Date::

This application

is a § 371 of

PCT/EP2004/012811

11 November 2004

Foreign Priority Information

Country::

Application Number::

Filing Date::

Priority Claimed::

DAY/MONTH/YEAR

Germany

103 52 608.0

11 November 2003

Yes

Germany

103 52 607.2

11 November 2003

Yes

Assignee Information

Assignee Name:: MAP Medizin-Technologie

GmbH

Street of mailing address::

Fraunhoferstrasse 16

City of mailing address:

Martinsried

State or Province of mailing

address::

Country of mailing address::

Germany

Postal or Zip Code of mailing

82152

Address::